| •   |                                   |                            |               | Application or Docket Number |       |                     |                            |  |
|---|-----------------------------------|----------------------------|---------------|------------------------------|-------|---------------------|----------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR<br>Effective October 1, 2000   |                                   |                            |               | 09/702320                    |       |                     |                            |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                                   |                            | SMALL<br>TYPE | SMALL ENTITY TYPE OR         |       |                     | OTHER THAN<br>SMALL ENTITY |  |
| TOTAL CLAIMS  | 7                                 |                            | RATI          | FEE                          | 1     | RATE                | FEE                        |  |
| FOR   | · NUMBER FILED                    | ARTICS RESIGNA             | BASIC         | BASIC FEE 355.00             |       | BASIC FEE           | 710.00                     |  |
| TOTAL CHARGEABLE CLAIMS   | 7 minus 20=                       | •                          | X\$ 9         | X\$ 9=                       |       | X\$18=              |                            |  |
| INDEPENDENT CLAIMS  | minus 3 =                         |                            | X40=          |                              | OR    | -08X                |                            |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                                   |                            | +135          | •                            | OR    | +270=               |                            |  |
| * If the difference in column 1 is less than zero, enter "O" in column 2  |                                   |                            | TOTA          |                              | OR    | TOTAL               |                            |  |
| CLAIMS AS AMENDED - PART II   |                                   |                            |               |                              |       | OTHER               | THAN                       |  |
| (Column 1)  | (Colum                            | SMAL                       | LENTITY       | OR                           | SMALL |                     |                            |  |
| Total • Cankey  Independent • tu  | H/GH<br>NUAE<br>PREVIO<br>PAID    | BER PRESENT<br>SUSLY EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
| Total • 8   | Minus                             | =                          | X\$ 9.        | •                            | ОЯ    | X\$16=              |                            |  |
| Independent • 1   | Minus 2 =                         |                            | X40-          |                              | OR    | X80=                | n                          |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                   |                            |               |                              |       | 14.                 |                            |  |
|   |                                   |                            | +135=         |                              | OA    | +270=               |                            |  |
| (Patrice 4)   |                                   |                            |               | EE                           | OR    | ADDIT. FEE          |                            |  |
| (Cotumn 1) CLAINS   | (Colur                            | ध्डा                       |               | L                            |       | <del>, ,</del>      |                            |  |
| REMAINING AFTER AMENDMENT Total   | MAA<br>PREVIO<br>PAIO             | SUSLY EXTRA                | RATE          | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
| Fotal 2   | Minus 8                           | -                          | X\$ 9=        |                              | OR    | X\$18=              |                            |  |
| Independent • 1   | Minus L                           | -                          | X40=          |                              | ÓЯ    | X80=                |                            |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                   |                            |               |                              |       |                     |                            |  |
|   |                                   | •                          | +135-         |                              | OR    | +270=               |                            |  |
|   |                                   | _                          | ADDIT, FE     |                              | OR    | TOTAL<br>ADDIT, FEE |                            |  |
| (Column 1)  | (Colum                            |                            |               |                              |       |                     |                            |  |
| O REMAINING   | PRINT<br>NUME<br>PREVIO<br>PAID I | BER PRESENT BUSLY EXTRA    | RATE          | ADDI-<br>TIONAL              |       | RATE                | ADDI-<br>TIONAL            |  |
| Total   | Minus - 2                         | •                          | XS 9=         | FEE                          |       | X\$18=              | FEE                        |  |
| Independent • 1   | Mirus 2                           | •                          | X40=          | -                            | OR    |                     |                            |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                   |                            |               |                              | OR    | X80=                |                            |  |
| If the entry in column 1 is lose than the entry in column 2, write "O" in column 3.   |                                   |                            |               |                              |       |                     |                            |  |
| "If the "Righast Number Proviously Paid For" IN THIS SPACE Is less than 80, ander "20."  ADDIT. FEE  ADDIT. FEE               |                                   |                            |               |                              |       |                     |                            |  |
| The Highest Number Proviously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. |                                   |                            |               |                              |       |                     |                            |  |